

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	6/11/01
FORMALITY REVIEW	AH	917	
RESPONSE FORMALITY REVIEW	SP	1027	11-15-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	7/12/01
22	2/21/01
23	2/21/01
24	2/21/01
25	2/21/01
26	2/21/01
27	2/21/01
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29	2/21/01
30	2/21/01
31	2/21/01
32	2/21/01
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41	2/21/01
42	2/21/01
43	2/21/01
44	2/21/01
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46	2/21/01
47	2/21/01
48	2/21/01
49	2/21/01
50	2/21/01

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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